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<b>APPLICANTS</b>  John A. Ferrante, St. Petersburg, FL;														
** CONTINUING DATA ***** <i>no</i>														
** FOREIGN APPLICATIONS ***** <i>no</i>														
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/20/2004														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">           Foreign Priority claimed  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no            35 USC 119 (a-d) conditions met  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           STATE OR COUNTRY FL         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           SHEETS DRAWING 5         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           TOTAL CLAIMS 20         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           INDEPENDENT CLAIMS 1         </td> </tr> <tr> <td style="border-bottom: 1px solid black;">           Verified and Acknowledged            Examiner's Signature <i>[Signature]</i> Initials         </td> <td colspan="4"></td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1	Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				
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Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials														
<b>ADDRESS</b> 21901 SMITH & HOPEN PA 15950 BAY VISTA DRIVE SUITE 220 CLEARWATER , FL 33760														
<b>TITLE</b> Board Game for Forming Words														
FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____					
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